

CLAIMS ONLY						Application Number 10/5/1115		Filing Date		
						Applicant(s)				
						* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	8		8							
Total Depend	48	39	37							
Total Claims	56	47	45							
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clms 12-16 improper because ~~multiple~~
multiple dependent can't depend on
a multiple dependent.